

Strategic approaches to prevent from drug abuse among children and youth at risk in Estonia

The survey, called *Estonia 2008*, which also approached the area of drugs, was conducted among the population in 2008 and covered the age group of 15 to 69. The survey was conducted by post and the sample was created on the basis of the Population Register.

The survey is conducted once every five years and it has included a block of questions about drug use since 1998.

When we compare the population surveys of 2003 and 2008, we can say that the proportion of people who have tried drugs some time in their lives has increased among the population.

Whilst the survey conducted in 2003 showed that 15% of people aged 15 to 64 had tried drugs some time in their lives, the survey conducted in 2008 showed that 21% of people in the same age group had tried drugs. Lifetime prevalence of drug use has increased both in the older and the younger age groups, but is considerably larger in the younger age groups. The increase has been particularly significant in the 25-to-34 age group, where 36% of people have already tried some illicit drug at least once in their lives (16% in 2003).

Similarly to previous years there are gender differences in drug use. In 2008 14% of women and 30% of men in the 15 to 64 age group had used an illicit drug at least once in their lives.

The data obtained from the population survey allowed us to take a look at drug use among the population according to different narcotic substances. It showed that using of cannabis is in the first place among the drugs used within the last 12 months and within the last 30 days, followed by ecstasy and amphetamine. It also showed that younger age groups use more narcotic substances. 6% of people aged 15 to 64 and 20% of people aged 15 to 24 had used cannabis in the last 12 months. 1.2% of people aged 15 to 64 and 3.3% of people aged 15 to 24 had used ecstasy in the last 12 months. Speaking about the gender aspect, we saw that women in some age groups have used certain narcotic substances more than men. In comparison to the 2003 population survey, we can say the use of certain drugs among men has

decreased but drug use among women has increased. For example, the proportion of women aged 15 to 24 who had used amphetamine in the last 12 months was 1.5% in 2003 and 2.7% in 2008 and the proportion of men was 9.3% in 2003 and only 4.6% in 2008. A similar tendency can be seen in the use of several other drugs. The use of sleeping pills and tranquilisers has increased in younger age groups (women aged 15 to 24, men aged 25 to 34) in 2008 when compared to 2003. We also got an information about the increasing of sleeping pills and tranquilisers in the last 30 days among both men and women in the 25-to-34 age group. Surprisingly, however, using of sleeping pills and tranquilisers among men in last 30 days in the 15-to-24 age group has decreased in 2008 (4.6% vs. 8.1%).

The data obtained in 2008 highlight the worrying fact that the proportion of people who use heroin and synthetic heroin (fentanyl) has increased among ordinary population. 2.2% of men aged 15 to 24 have used heroin in the last 12 months and 1.1% have used fentanyl.

The ESPAD (European School Survey Project on Alcohol and Other Drugs) survey of 15-16-year old school students in 2007 indicated that drug use among students has increased somewhat. In 2007 33% of students, 62% of boys and 38% of girls had tried a narcotic substance as compared to 7% in 1995, 15% in 1999 and 24% in 2003. Results of the surveys conducted over the years suggest that the most popular narcotic substances among school-aged students are cannabis, inhalants and tranquilizers/sedatives. In 1995 the number of students who had tried amphetamine at least once in their lifetime soared, but in 2007 popper was the newcomer. According to the survey the average age when students try illegal narcotic substances for the first time is 13–15, but 24% of inhalant users and 19% sedative users had started before the age of 11.

The survey also indicated that more than one-fourth (26%) of students in the 15–16 age group involved in the study in 2007 had used cannabis, 5.7% ecstasy, 3.8% amphetamine and 0.5% had injected a narcotic substance. 8.7% of the sample students had used solvents and 7.1% tranquilizers/sedatives. Drug use is more prevalent among boys, except in the segment of tranquilizers and sedatives: 7.9% of girls had used these substances as compared to 6.3% of boys. During the last 12

months 19% of school-aged students had used cannabis: one-third of boys and 19% of girls involved in the survey. During the last 30 days 9% of 15–16- year old boys and 4% of girls in the same age group had used cannabis. Examining drug use over the last 30 days and 12 months suggests that the most popular drug after cannabis is amphetamine. The results of the 2005/2006 health behaviour survey of school-aged children demonstrate that 16.3% of boys and 12.6% of girls in the 11–15 age group had smoked cannabis at least once and boys as well as girls tried cannabis for the first time at the age of 13.

The next ESPAD survey of schoolchildren will be conducted in 2011.

National action plan, strategy, assessment and coordination

The Ministry of Social Affairs is still responsible for coordinating the Multidisciplinary Drug Prevention Strategy for 2004 to 2012. Development of the Action Plan of the Drug Prevention Strategy for the years 2009 to 2012 is also under the guidance of the Ministry of Social Affairs and in cooperation with relevant institutions started in 2008. The work was done in different workgroups and it was decided that the source document of the strategy has to be updated in addition to the preparation of the action plan. The source document of the strategy was updated in 2009. This situation was caused by the changed situation in drug addiction and the need to make the Estonian strategy comply with the European Union drugs strategy (EU Drugs Action Plan 2009-2012). The carrying out or functioning of the strategy in Estonia has not been assessed.

On the local level, the Tallinn City Government approved the Development Plan for Prevention of the Spread of Alcoholism, Drug Abuse and HIV/AIDS in Tallinn for 2009-2012 in January 2008. This development plan is set out in the part of the Tallinn Population Development Plan 2008-2015 where addiction and HIV/AIDS problems are discussed. The development plan covers primary prevention, treatment, rehabilitation and harm reduction by trying to influence both the drug demand and supply factors. The objective of the development plan is to reduce the use of alcohol and illegal drugs among people in Tallinn, to guarantee better access to treatment and rehabilitation services and their quality. Another goal was to achieve a permanent decrease in the number of new cases of HIV by harm reduction and

increasing the safety of sexual relationships. The role of prevention has been increased considerably and the principle of intervening as early as possible has been applied. Development of cooperation networks between sectors is the key to the development plan and it sees the City Council, the City Government, the city's boards and city district administrations as levels of activity by dividing roles and areas of responsibility.

Economic analyses

When we compare public sector expenditure in the area of drugs in 2008 and 2007, we can say that actual expenditure increased somewhat in 2008.

2,310,660 EUR was spent on carrying out the NSPDA in 2007 and the relevant amount in 2008 totalled EUR 2,507,153. 61% of the funds used within the scope of the NSPDA in 2008 was used in the area of administration of the Ministry of Social Affairs for activities in the area of demand reduction (prevention, treatment and rehabilitation, harm reduction, monitoring and evaluation). The primary prevention field in the area of administration of the Ministry of Social Affairs was funded with EUR 338,016 and the area of treatment/rehabilitation with EUR 894,481.

Separate financial resources for drug prevention have not been highlighted in the Ministry of Education and Research. The primary activities in the area of harm reduction are financed mainly from the funds of the National HIV and AIDS Strategy. These services are the common part of two national strategies, the HIV/AIDS strategy and the NSPDA. 31% , EUR 785,742 of the NSPDA funds were used in the areas of administration of the Ministry of the Interior and the Ministry of Finance for supply reduction. Both the Ministry of the Interior and its agencies and an agency of the Ministry of Finance, the Tax and Customs Board, are responsible for the area of supply reduction. It is important to say here that supply reduction is largely a routine activity for the institutions responsible for this area where highlighting amounts of money according to activities is difficult. All in all, it may be said about 2008 that the criminal police focused mainly on ascertaining and catching key criminals, street dealers with large turnovers, their suppliers and large criminal groups engaged in drug-related crimes. Ascertaining and confiscating crime-related income received more attention than before.

Catching drivers under the influence of drugs and carrying out prevention programs aimed at young people have always been priorities for the police force.

Difference law enforcement agencies in Estonia are engaged in domestic and international cooperation and they take part in joint operations.

The National Strategy for Prevention of Drug Addiction and its long-term and annual action plan is the framework document for prevention of drug addiction. Institutionally, primary prevention in Estonia falls mainly in the area of responsibility of the Ministry of Education and Research and the National Institute for Health Development, which operates in the area of administration of the Ministry of Social Affairs. The task of the Ministry of Education and Research is to distribute information about drugs to students in general education schools, establishment of prevention principles used in schools and guaranteeing alternative activities for children. The National Institute for Health Development coordinates and supports prevention on the regional level and organizes nationwide prevention campaigns. One of the important roles of the NIHD is making adequate information about drugs available to the population.

Universal prevention

Estonia is divided into 15 counties and we have 227 local municipalities. In 2007 139,458 euros were allocated to county-specific HIV and drug prevention action plans of which NSDAP' funds for regional prevention form 82,110 euros . The national strategy for HIV and AIDS provided the rest of the funding. A number of prevention-related activities, such as delivering information/informing residents and using the county expertise, were funded from county resources and are not listed separately in the report on spent funds.

In 2007 the largest items of expenditure were the funding of the competition for county-specific prevention projects (19,579 euros), activities related to raising students' awareness (17,036 euros) and enhancing the competence of school teachers and county specialists (16,330 euros).

In 2007 a total of 19,570 euros was used for enhancing the competence of county health boards and for administering prevention work. County-specific and crosscounty network work includes round-table meetings/working groups, seminars/training sessions and regular exchange of information between the various

specialists in a county as well as between drug specialists from other counties.

Only a couple of counties used action plan resources for providing drug counseling for youths. The low importance of counseling in action plans is probably due to the fact that youth information and counseling centers funded by the Ministry of Education and Research were functioning in all counties.

Among other things such center provides youths with necessary prevention-related information on drugs. Visual information on the influence of narcotic substances and information on counseling and help are freely available at such centers. Funds from county-specific action plans were also used for mapping local situations. An overview of the results of various surveys and studies conducted in different counties is not available at the moment. The unification of methodology and instruments would ensure the comparability of the data from various counties. It would be useful to prepare a short questionnaire on drug use and sexual behaviour that every county could use when needed and analyse the results in comparison with the data from other counties.

The level of awareness of the local population was raised by means of various information events (information days, local campaigns) and county-specific media (radio, newspapers). Some counties had used the means provided by the HIV and drug prevention action plans for general health behaviour activities (11,022 euros) and alcohol/tobacco prevention (3,978 euros). In this regard it is important to establish what kind of activities can be funded by HIV/AIDS and drug addiction prevention and what kind of activities should be funded as health behaviour activities by the heart and cardiovascular diseases strategy. Information on the results of drug addiction prevention implemented on the county level is not available at the moment. In 2008 the NIHD organised regional prevention and dealt with information distribution activities (by issuing informational materials, updating webpage narko.ee and organizing two nationwide media campaigns) in the area of universal prevention within the scope of the NSPDA. Focus was given also on the development of methodological materials for specialists. The NIHD used almost five 300 000 EUR of the NSPDA resources for universal prevention activities. The activities falling into the area of the Ministry of Education and Research.

Research were completed within the scope of the funding for general education. The main prevention activities of the Ministry of Education and Research in 2008 included distribution of prevention information through the youth information centres of local governments and youth-to-youth training activities.

Irrespective of the fact proven in world practise that successful prevention is based on drug prevention lessons integrated into the school programme , not all educational institutions offering basic education had incorporated the relevant lessons into their programs in 2008. Teacher textbooks for teaching social management skills to different school levels have been developed with the help of the United Nations, the NIHD and the National Health Insurance Fund, but they are only recommended study materials and their use depends largely on the schools initiative and the existence of teachers with relevant training. The Ministry of Education and Research has confirmed that the new syllabus of human studies will be completed in 2009 and it stipulates the obligation of schools to discuss prevention of risk behaviour in human studies classes in the second to the twelfth year of school. It is planned to build the new syllabus largely on the existing social management skills study materials, where subject teachers have to learn teaching the material by passing a national in-service training program. In 2008 the training about the teacher textbook for support schools was organized and financed using the funds allocated by the NSPDA to the NIHD (EUR 9,939) and a total of 236 teachers all over Estonia were trained. In general, teacher textbooks about social management skills have been developed in different stages since 2001 for the purpose of preventing drug use. A total of three handbooks have been prepared for teachers in the following stages of school: years 1 to 3, years 4 to 6, years 7 to 9 and also for years 1 to 5 using a simplified study program (support schools). The books give information about drugs and advise about dealing with drug problems in the school environment and they also contain role-play and active exercises that develop different social skills.

The NSPDA funded regional drug prevention activities with a total of EUR 91,618 in 2008. The needs of counties remained the basis of regional prevention work. Generally the activities that were funded within the scope of county action plans included organization of different events for young people (hikes, adventure games, camps, competitions, excursions) EUR 22,506, organization of the activities of the drug prevention council/health room EUR 12,395, competitions of

prevention projects initiated at the local level EUR 12,345 and training of county specialists (teachers, social workers and other specialists who work with young people EUR 11,379. Regional prevention activities also included lectures about drug prevention for students in schools, development of networking in and outside counties, giving information parents and working with risk children. A total of EUR 5,600 was spent on distribution of information through local media channels. Some counties had also financed health promotion events, the fight against tobacco and alcohol and HIV/AIDS activities from their drug prevention action plans. In addition to activities in counties and networking, the national drug conference *Addicted or Not?* was held in November 2008 where the main emphasis had been placed on the factors that make prevention effective.

As for informational materials, the publication *Narko Hää! 2: Kanepi eri* (Voice of Drugs 2: Cannabis Special), which is aimed at young people, was published in the first half of 2008. *Narko Hää!* is an informative publication in the format of a newspaper that focuses on specific drug subjects. The insert *Tõmbaja* (Puffer) was published in addition to the regular publication, which tried to explain the dangers of cannabis use and its harmful effect on health to young people from a humorous angle. The third issue of the newspaper was published in the second half of the year and was aimed at introducing drug-related subjects to parents. All informational materials were published both in Estonian and Russian (50,000 copies in Estonian and 12,000 in Russian). The total cost of the various published informational materials was EUR 22,367. The increased emphasis on people whose native language is not Estonian and ethnic minorities was a positive trend in 2008. In addition to the translation of the social management skills teacher textbook for support schools into Russian (144,132 kroons; EUR 9,212), work was also done in 2008 to integrate the subject of drug prevention into projects and training aimed at young people of ethnic minorities (children in language and summer camps were educated in cooperation with the Estonian Association ANTI AIDS).

Drug prevention media campaigns

In addition to county-level prevention drug awareness campaigns addressing the general population were run in 2007. A total of 178,480 euros was spent for this end. The purpose of the nationwide drug addiction prevention campaign “Drug stories never have nice endings” ran over the period 19.03.-09.04.2007 was to create a blunt picture of the possible consequences of incidental drug use. The campaign was launched in three regions: Tallinn, Tartu and Ida-Viru County. The campaign included TV-clips and the preparation and distribution of visual informational materials. The campaign’s effectiveness has not been evaluated, but feedback from the general population was positive.

In addition to underlining the dangers of drug use a nationwide drug campaign “Know your enemy” was run over the period 03-31.10.2007. The goal of the campaign aimed at Estonian parents was to raise their awareness on drugs because only an informed parent can protect his children from drugs. The campaign included TV-clips as well as visual materials. Interested parents could obtain additional information from the National Institute for Health Development’s drug-oriented site www.narko.ee.

Additional information on both campaigns run in 2007 is still available on this site which during the campaigns was updated on a daily basis. This site provides also adequate and youth-oriented information on various drugs, drug legislation and other drug-related subjects. The site contains information on help and counselling options. Also, it offers a chance to consult a specialist via e-mail. In addition to the electronically available drug-related information the National Institute for Health Development has prepared youth-oriented prevention paper materials titled *Narko Hääl* in Estonian and Russian.

2008

Two nationwide campaigns were organised in spring and autumn 2008 in addition to the distribution of information about drugs within the scope of regional prevention activities.

The first campaign *Kanep tõmbab sind (Cannabis Smokes You)* was carried out from 17 to 31 March. The campaign was aimed at young people aged 15 to 24 living in Estonia and described the social problems and health risks associated with cannabis use. The second campaign *Jää puhtaks (Stay Clean)* was carried out from 15 September to 5 October. Young people aged 14 to 24 living in Estonia were the target group of the campaign and its goal was to reduce their interest to experiment with drugs. Outdoor media, youth portals, television (TV3, Kanal 2, ETV), printed media and informational materials distributed in prevention campaigns were used to give the message. The narko.ee website administered by the NHID has become the main portal for information about drugs. One of the goals of both information campaigns carried out in 2008 was to promote the use of the narko.ee website among the target groups of the campaigns.

A brief overview of visits to the narko.ee website, its content and achievement of the goals of the campaigns was also prepared in 2009. The survey showed that Estonians from Tallinn and Tartu County are the most frequent visitors of the website. More than a half of the people who visited the narko.ee website belonged to the 15-to-24 age group. An analysis of visits to the narko.ee website showed that the average number of visitors per month was 7,460, 34% of them were so-called momentary visitors who left the page immediately after entering it. The average duration of a visit was five minutes and about six sub-pages were viewed. The number of visits to the website increased significantly during the information campaigns organised by the NIHD. The number of visitors was the biggest during the *Cannabis smokes you* campaign carried out in spring 2008 when a total of 40,273 people visited the website. Therefore, we can claim that the campaigns do meet one of their sub-goals, which is to direct the target group to the narko.ee website to find additional information. If we leave out the visitors who leave the website immediately after entering (34%), then we also see positive signs in the visits to sub-pages where nearly a third of the visitors have viewed eight or more sub-pages. More than one-third of the visitors spend more than 3 minutes on the website.

Visitors have obtained information about the website mainly by surfing the Internet. The difference in the language of use is the most noticeable in the case of the TV advert, which is mentioned by considerably more Estonian-speaking visitors of narko.ee. Russian-speaking visitors mention their friends and acquaintances as the source of information. The sub-pages that give specific information about drugs are the most popular. Both the Google Analytics programme and feedback from visitors show that sub-pages about cannabis and 'what is what' are the most popular. Visits to different subpages also depended on drug campaigns and the specific messages of the campaigns. In general, the people who visited narko.ee found the website informative, up-to-date and easy to use.

Selective prevention and indicated prevention

Selective prevention addressed at risk groups and youths engaging in risky behaviour is very limited in Estonia. 2007 county-specific action plans for HIV and drug addiction prevention indicate that work with risk-group children and their parents received less attention than needed. Prevention and group work aimed at risk-group children was funded by 1,276 euros. Although a nationwide awareness campaign was organised for parents (see the section about media campaigns), the share of individual approach for the families and parents of risk-group children and child inclusive prevention in action plans was insufficient. In previous years activities with risk-group children have in addition to NERS budget also been supported by the Tallinn Social Welfare and Health Care Department through HIV/AIDS and drug projects applied for by the non-profit sector. In 2007 the majority of drug addiction projects funded by Tallinn were related to the treatment and rehabilitation of youths. Two projects provided counselling: one included counselling and organising a support group for the family-members of drug users, the other supported the operation of the drug and HIV/AIDS information and counselling line (1707) with 40,189 euros.

In addition to county-specific drug prevention plans the Ministry of Education and Research engages in selective prevention via prevention work conducted at special schools. In Estonia there are two special schools for youths with deviant behaviour or for youths who do not respond to conventional school discipline.

Drug prevention at special schools included alternative activities, promoting healthy living and sociotherapeutic activities. At a special school for the boys the subject of drugs had been introduced into group discussions held as a part of the study programme. Drug prevention in specialised schools was financed from the budgets of the schools.

Drug prevention was largely based on the discussion groups, role-play and movie discussions held within the scope of studies. Schools also organised several health promotion and alternative activities for young people in specialised schools.

Regarding selective prevention it is necessary to mention also the drug prevention activities funded by the budget of the City of Tallinn within the scope of non-profit projects in 2008.

The three projects were about drug prevention of risk group children (12,259 kroons; EUR 783), drug and HIV counselling for students of secondary specialised schools (171,157 kroons; EUR 10,939) and work with the relatives of drug addicts (40,000 kroons; EUR 2,556).

NEXT Steps

- **Parents education**
- **The regulations and standards for the institutions for drug abusing children**